

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION  
REINSTATEMENT



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

00 OCT 17 PM 1:30

DOCUMENT # P99000040950

1. Corporation Name

A FLORIDA MILLENIUM ENTERPRISE, INC.

Principal Place of Business

Mailing Address

5900 SW 5TH ST  
MIAMI FL 33144

5900 SW 5TH ST  
MIAMI FL 33144



If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, If Applicable

3. New Mailing Office Address, If Applicable

4. Date Incorporated or Qualified  
To Do Business in Florida

05/05/1999

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. FEI Number

Applied For

City & State

City & State

65-0920345

Not Applicable

Zip

Country

Zip

Country

6. CERTIFICATE OF STATUS DESIRED ☐ \$8.75 Additional Fee required  
for a Certificate of Status

7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Title(s) 1	Name of Officers and/or Directors 2	Street Address of Each Officer and/or Director 3	City / State / Zip 4
PSTD	LYTER, RICHARD A	5900 SW 5TH ST	MIAMI FL 33144
			100003441591--8 -10/27/00--01015--009 ***150.00 ***150.00

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

COSGROVE, JOHN F  
201 W FLAGLER ST  
MIAMI FL 33130

Name

Street Address (P.O. Box Number is Not Acceptable)

Suite, Apt. #, Etc.

City

State  
FL

Zip Code

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S.

Signature of  
Registered Agent

SIGNATURE REQUIRED  
REGISTERED AGENT MUST SIGN

Date

11. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(i), F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Lyter

Oct. 12 2000

Date

305 260 0267  
Daytime Phone #

A Florida Millenium Enterprise, Inc.  
5900 S.W.5 Street  
Miami, Florida 33144  
Phone: 305-260-0267  
Fax: 305-267-5491

October 12,2000

Florida Depts. State.  
Division of Corporations  
Tallahassee, Florida 32314

Ref.: DOCUMENT # 99000040950

Dear Sir:

We spoke to Mr. Tyron Scott from your Office on Thursday October 12,2000 and explained to him that this is the first time that we have ever received this Documents here. The last several months we had have Five Different Mail Carriers over the last Six Months, which is unusual. In the Future we will Not wait for the Notice, we will monitor more closely.

Respectfully

  
Richard Lyter  
President